

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	09/634,045
		Filing Date	August 8, 2000
		First Named Inventor	Drew Eric Wingard
		Art Unit	2825
		Examiner Name	Thompson, Annette M.
Total Number of Pages in This Submission	20	Attorney Docket Number	2998P011

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input checked="" type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div>Petition for Revival /Unavoidable (2 pp.); Declaration of J. Scott Heileson (3 pp.); Appendix A for Appellant's Brief (3 pp.); postcard <b>Notice of Appeal</b> <b>Appeal Brief</b></div>
Remarks		

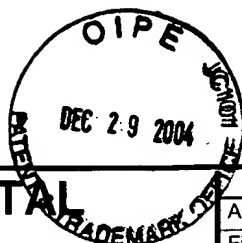
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jeffery Scott Heileson, Reg. No. 46,765 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	12/27/04

## CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Cathy Bachmann		
Signature		Date	12/27/04



# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Complete if Known

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☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 1,500.00

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments  
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

1. EXTRA CLAIM FEES

Total Claims	<table><tr><td>11</td><td>20*</td></tr></table>	11	20*	=	<table><tr><td>0</td></tr></table>	0	x	<table><tr><td>Fee from below</td><td>50.00</td></tr></table>	Fee from below	50.00	=	<table><tr><td>Fee Paid</td><td>\$0.00</td></tr></table>	Fee Paid	\$0.00
11	20*													
0														
Fee from below	50.00													
Fee Paid	\$0.00													
Independent Claims	<table><tr><td>3</td><td>5*</td></tr></table>	3	5*	=	<table><tr><td>0</td></tr></table>	0	x	<table><tr><td>200.00</td></tr></table>	200.00	=	<table><tr><td>\$0.00</td></tr></table>	\$0.00		
3	5*													
0														
200.00														
\$0.00														
Multiple Dependent						=								

Large Entity	Small Entity
Fee Code	Fee Code
1202	2202
1201	2201
1203	2203
1204	2204
1205	2205
50	25
200	100
360	180
300	150
300	150
Fee Description	
Claims in excess of 20	
Independent claims in excess of 3	
Multiple Dependent claim, if not paid	
**Reissue independent claims over original patent	
**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)	
(\$)	
0.00	

\*or number previously paid, if greater, For Reissues, see below

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	2051	130	65	Surcharge - late filing fee or oath	
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet.	
2053	2053	130	130	Non-English specification	
1251	2251	120	60	Extension for reply within first month	
1252	2252	450	225	Extension for reply within second month	
1253	2253	1,020	510	Extension for reply within third month	
1254	2254	1,590	795	Extension for reply within fourth month	
1255	2255	2,160	1,080	Extension for reply within fifth month	
1401	2401	500	250	Notice of Appeal	500.00
1402	2402	500	250	Filing a brief in support of an appeal	500.00
1403	2403	1,000	500	Request for oral hearing	
1451	2451	1,510	1,510	Petition to institute a public use proceeding	
1460	2460	130	130	Petitions to the Commissioner	
1807	1807	50	50	Processing fee under 37 CFR 1.17(q)	
1806	1806	180	180	Submission of Information Disclosure Stmt	
1809	1809	790	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	2810	790	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)				Petition for Revival/Unavoidable	500.00
SUBTOTAL (2)				(\$)	1,500.00

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Jeffery Scott Heileson	Registration No. (Attorney/Agent)	46,765	Telephone	(408) 720-8300
Signature				Date	12/27/04